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35876

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03/12/2004

ROGALSKY & WEYAND, LLP
P.O. BOX 44
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Karla M. Weyand

(Depositor's name)

Karla M. Weyand

(Signature)

June 14, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/668,119	09/22/2000	William B. Solomon	011.00250	9568

TITLE OF INVENTION: NUCLEIC ACIDS THAT ENCODE TRANSCRIPTIONAL ADAPTOR PROTEINS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/14/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KATCHEVES, KONSTANTINA T	1636	536-023500

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Rogalskyj & Weyand**
 2 **LLP**
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Research Foundation of
State University of New York

Albany, NY

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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(Authorized Signature)

(Date)

Karla M. Weyand

June 14, 2004

06/17/2004 SZEWDIE2 00000027 09668119

01 FC:2501
 02 FC:8001

665.00 OP
 30.00 OP

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TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)
(37 C.F.R. 1.311)

Docket No.
011.00250

Applicant(s): William Solomon

JUN 16 2004

Application No.
09/668,119

Filing Date
Sept. 22, 2000

Examiner
K. Katcheves

Customer No.
35876

Group Art Unit
1636

Confirmation No.
9568

Invention:

Mail Stop Issue Fee
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Alexandria, VA 22313-1450

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 665.00 ☐ Design Fee: _____ ☐ Plant Fee: _____
- ☐ Publication Fee: _____
- ☒ A check in the amount of \$695.00 is attached.
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Karla M. Weyand

Signature

Dated:

June 14, 2004

Karla M. Weyand
Reg. No. 40,223
Rogalskyj & Weyand, LLP
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Livonia, New York 14487-0044
(716) 626-5380

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